

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

(A)

PLAINTIFF
RONNIE DANIELS - #2007-0064180COURT CASE NUMBER
08 C 1727

08 C 1727

DEFENDANT
CHICAGO POLICE DEPARTMENT, ETALTYPE OF PROCESS
SUMMONS & COMPLAINTNAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
SERVE POLICE OFFICER JIMENEZ, BADGE #14101- CHICAGO POLICE DEPARTMENT

AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

3510 SOUTH MICHIGAN AVENUE CHICAGO, IL 60653

cb Supervisor of subpoenas

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Number of process to be
served with this Form 285

1

RONNIE DANIELS - #2007-0064180
COOK COUNTY JAIL
P.O. BOX 089002
CHICAGO, IL 60608Number of parties to be
served in this case

7

Check for service
on U.S.A.

X

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE *(Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):*

FILED

Jul 14, 2008
JUL 14 2008 YM

Fold

Fold

Fold

MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT
PLAINTIFF TELEPHONE NUMBER
DEFENDANT

DATE

06-10-08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process 2 of 8	District of Origin No. 24	District to Serve No. 24	Signature of Authorized USMS Deputy or Clerk	R.T.	Date 06-10-08
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above *(See remarks below)*

Name and title of individual served <i>(if not shown above)</i> Vincent Coffo legal	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address <i>(complete only different than shown above)</i>	Date 6/25/08 Time 2:53 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
Signature of U.S. Marshal or Deputy S. D.	

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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one Service for charged Same case + location see process sheet 1 for charges.

REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED